



GENERAL INSURANCE Company Limited

19-21 Knutsford Boulevard, P.O. Box 514, Kingston 5, Jamaica, West Indies.
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PROPOSAL FOR MOTOR TRADE RISKS

THE PROPOSER

FULL NAME:	
POSTAL ADDRESS:	
PREMISES RISK:	
OCCUPATION (Type of "MOTOR TRADER"):	
TRN:	E-MAIL ADDRESS:
Telephone Nos. (1)	(2)
Cell: No(s).	Provider(s):

GENERAL INFORMATION

1. How long have you carried on business: i) At these premises? ii) Elsewhere?	i) ii)
2. Previous Insurers (last 3 years)	
3. Has any Insurer: i) Declined to insure you? ii) Required special terms to insure you? iii) Cancelled or refused to renew your insurance If so, give details	i) ii) iii)
4. Give details (including date and driver, if any,) of Accidents, Claims or losses, in the last 3 years: a) Occurring on or at the Premises	a)
b) Occurring away from the Premises	b)

SECTION A - PREMISES RISK

The questions in Section A relate to Premises Risk and should ONLY be completed if this coverage is required.

SITUATION of the PREMISES _____
 Is your Machinery, Equipment and/or Plant:
 a) In a good state of repair? _____ b) Regularly maintained? _____
 Give particulars of any lifts, cranes or hoists us at your premises. _____
 State total estimated wage roll _____

Tick below for Coverage required.

- Coverage A:** Third Party Liability for Bodily Injury and Property Damage **excluding** damage to any motor vehicle in your custody or control or to your own vehicle(s).
- Coverage B:** Third Party Liability for Bodily Injury and Property Damage including accidental damage to any motor vehicle in your custody or control (limit any one vehicle / event \$750,000*) **excluding** damage to your own vehicle(s).
- Coverage C:** Third Party Liability for Bodily Injury and Property Damage including accidental damage to any motor vehicle in your custody or control (limit any one vehicle / event \$750,000*) and including damage to your Motor Vehicles.**

- i) Is premises occupied as a Garage? or are repairs to Motor Vehicles carried out?
- ii) Is there an open air Car Park adjoining / outside the premises?
- iii) Do you require an extension of cover for liability arising out of work away from the premises?
- iv) Is the Premises occupied as a Showroom only?

v) Re Coverage B or C – Do you wish to increase the limit on Any One Third Party Vehicle/Event to:

- a) \$1,000,000
- b) \$1,500,000
- c) \$2,000,000

vi) Re Coverage C – State Sum Insured required on Damage to Own Vehicles:

a) Specified Vehicle(s) (describe): _____

b) Unspecified Vehicles (provide Limits)

i) Limit any one vehicle \$ _____

ii) Limit any one event \$ _____

NOTE: EXCLUSIONS to A: PREMISES RISK include:

- a) Damage to property caused directly or indirectly by fire or explosion.
- b) Any consequence of burglary, housebreaking or theft or any attempt thereof.
- c) Any defective workmanship.
- d) Damage to any Motor Vehicle or its accessories caused by weather conditions.
- e) Death, injury or damage resulting from the driving elsewhere than in or on the Premises of any Vehicle.

SECTION B - ROAD RISKS

The questions in Section B relate to Road Risks and should ONLY be completed if this coverage is required.

1. TRADE PLATE NUMBERS: _____

2. Details of Drivers

DETAILS	Driver 1	Driver 2	Driver 3	Driver 4
a) Name				
b) Age				
c) Type of Licence				
d) Year First Issued				
e) Do you suffer from physical or mental disability or infirmity?				
f) Have you ever been convicted of a traffic offence in the last 3 years?				
g) Have you ever c) had any accidents or claims in the last 3 years				

If the answers to e), f) or g) is yes, please provide details below:

3. COVER REQUIRED

- a) Comprehensive
- b) Third Party Fire & Theft
- c) Third Party

4. LIMITS OF LIABILITY

The Standard Limits are: Any One Vehicle \$750,000 / Any One Event \$1,500,000.

Do you wish to increase limits to:

- a) Any One Vehicle \$1,000,000 / Any One Event \$2,000,000. or
- b) Any One Vehicle \$1,500,000 / Any One Event \$2,000,000.

5. Do you require Coverage on your own vehicle(s) used only for Motor Trade purposes?

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If so, please state Year of Manufacture, Make, Model, Model#, Type of Body, Chassis#, Registration# below:

6.

- i) Is your business a Service Station only (i.e. No Trade Plate or Named Driver)?
- ii) Does your Business entail or include buying and/or selling of Motor Vehicles?
- iii) Do you require Legal Liability to Passengers (Passenger Risk) to be included? (Note, this excludes employees).
- iv) Do you require Demonstration Driving to be included?
- v) Do you require extension to cover Malicious damage?

This insurance will not be in force until the proposal has been accepted. Subject thereto this insurance is to commence on _____ and to be renewable on _____

The Policy is voidable if the proposer makes any false statement or withholds any material information

Date _____

Proposer's Signature _____